

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	NW	71534	06-30-89
O.I.P.E. CLASSIFIER		12	7/2
FORMALITY REVIEW	JIB	40303	7-13

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
Original	
1	5/5/89
2	5/12/89
3	5/12/89
4	5/12/89
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Claim	Date
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If more than 150 claims or 10 actions  
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